STATEMENT OF ORGANIZATION		OFFICE USE ONLY
Name and Address of Committee	2. Date of this Statement	
Committe to Elect lesti Harris	1/24/2023	
21012 Baronne Street	3. Estimated Membership	
New nleans, LA 7013	1	
Check If: New Committee	4. Amended Statement? Yes No	
5. All Committee Officers and Directors (including Chairperson, Treasurer, if any, and any other committee officers and directors)		
a. Name b. Position Mamta MBWANT Chairperson	c. Address Sell aline St	rect NOVA FOLIS
Jest Bromberger Treasurer	ZULL BOVONN	e & nour 70113
6. Affiliated Organizations (Any organization, other than a political committee, which directly or inc	directly established, administers, or f	inancially supports this committee.)
a. <u>Name</u> b. <u>Address</u>		c. Relationship to Committee
NIA		
7. All Depositories for Committee Funds (committee funds must be deposited in one or more banks or savings and loan institutions or money market mutual funds.)		
a. <u>Name</u> b. <u>Address</u>		
Régions Banh 400 Poy-Las Strect nova 70130		
8. IF THIS COMMITTEE SUPPORTS A SINGLE CANDIDATE: a. Check one: Principal Campaign Committee Subsidiary		
Committee		
b. Name of Candidate		c. Office Sought by the Candidate
LESUI HAVIS		NEW Moons CM Conc
9. a. Name of Person Preparing Report		
b. Daytime Telephone Soy - 279-3606		
10. WE HEREBY CERTIFY that the information contained in this STATEMENT OF ORGANIZATION is true and correct to the best of our knowledge, information and belief.		
This 24 May of JanJany . 202	3.	ETHICS BOARD REC'D
on	50	4-214-7300
Signature of Committee Chairperson	Dayt	ime Telephone Number
Signature of Committee Treasurer, if any	50 Davi	time Telephone Number
Signature of Committee Treasurer, if any	Day	and relephone runner